## Visit

http://www.kysos.com/arponline for instructions on filing this annual report over the Internet

## **COMMONWEALTH OF KENTUCKY** JOHN Y. BROWN III, SECRETARY OF STATE **ANNUAL REPORT**

(See Reverse Side for Filing Instructions)

RECORD #:	0520672	DUE: JUNE 30	. 2002	(3) FILING FEE \$15.00	
				4.3.33	
(1) EXACT LIMIT Changes made :	ED LIABILITY COMPANY NAME A to principal office address cannot be mad	AND CURRENT PRINCIPAL OFFI e on this form. Check (6) A to request for	CE ADDRESS orm to be mailed or	download form from web site	
ATL	ANTIC ASSURANCE (	OF VIRGINIA, LLC		(4) STATE OR COUNTRY OF ORGANIZATION	
4425 RANDOLPH ROAD, SUITE 400 CHARLOTTE, NC 28211				NC	
City	-11.2011L, NO 20211	RECEIVE	D		
	1.11			(5) DATE OF ORGANIZATION OR DATEAUTHORIZED TO TRANSACT BUSINESS	
		•		08/09/2001	
		SECRETARY OF STATE			
Changes made to	EGISTERED AGENT AND REGIST to the registered agant or registered office equest form to be mailed or download for	cannot be made on this form,	Statement of Statement of Statement of MAIL FORM TO	f Change of Principal Office Address Form. f Change of Registered Agent or Registered Office Form. O	
СТ	CORPORATION SYST	EM			
	NTUCKY HOME LIFE B JISVILLE, KY 40202	UILDING     _			
	, , , , , , , , , , , , , , , , , , , ,	-			
<del></del>					
7) MANAGEMEN	IT Verify management or check one.			``	
A. 🗆 Maŋager	Managed				
B. D Member I	Managed				
B) MANAGER (S)	OR MEMBER (S) If the company	has previously filed an annual ren	ort verify the nam	nes of the managers or members listed below. Please	
note any addition	ons to or changes in the names of dresses of the current managers, if	nanagers or members and give the	e address for eaci	n person listed. If (8) is blank, type or print the names.	
lar DA	<u> </u>			h Rais Charlotte, N. 28211	
Name	1) 11	Address	Mivaely	n Rais ( ) Her to the, [MARA!!	
hame -oui	ie Brinkley	Address Address	7 YACK	Amra Stelas fichmond	
Name Kan	ebert Hiuson	28:2	Parkman	~ Rd Ste 120 Kiehmonia Ha	
and the		Address		' ( <del>'</del>	
Name		Address			
Name		Address			
		·			

I VERIFY THAT INFORMATION IN THIS ANNUAL REPORT IS CURRENT AS OF THE DATE THIS REPORT IS EXECUTED. ☐ MANAGER DATE O MEMBER (Check One)